

**Application Data Sheet**

**Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD disks::  
Number of Copies of CDs::  
Sequence Submission?:: None  
Computer Readable Form (CRF):: No  
Number of copies of CRF:: 0  
Title:: MAGNETIC RECORDING MEDIUM AND  
PRODUCTION METHOD THEREOF AND  
MAGNETIC RECORDING DEVICE  
Attorney Docket Number:: OSP-11676  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 9  
Small Entity?:: No  
Latin Name::  
Variety Denomination Name::  
Petition Included?:: No  
Petition Type::  
Licensed US Gov't Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

10026709-122701

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**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: MIGAKU  
Middle Name::  
Family Name:: TAKAHASHI  
City of Residence:: SENDAI-SHI  
State or Province of MIYAGI-KEN  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 20-2, HITOKITA 2-CHOME  
TAIHAKU-KU  
City of Mailing Address:: SENDAI-SHI  
State or Province of Mailing Address:: MIYAGI-KEN  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: DAVID  
Middle Name::  
Family Name:: DJAYAPRAWIRA  
City of Residence:: SENDAI-SHI  
State or Province of MIYAGI-KEN  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 05, AZA-AOBA, ARAMAKI, AOBA-KU  
  
City of Mailing Address:: SENDAI-SHI  
State or Province of Mailing Address:: MIYAGI-KEN  
Country of Mailing Address:: JAPAN

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Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: KAZUYA  
Middle Name::  
Family Name:: KOMIYAMA  
City of Residence:: SENDAI-SHI  
State or Province of MIYAGI-KEN  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 05, AZA-AOBA, ARAMAKI, AOBA-KU

City of Mailing Address:: SENDAI-SHI  
State or Province of Mailing Address:: MIYAGI-KEN  
Country of Mailing Address:: JAPAN  
Postal or Zip Code of Mailing Address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: JAPAN  
Status:: Full Capacity  
Given Name:: SATORU  
Middle Name::  
Family Name:: YOSHIMURA  
City of Residence:: SENDAI-SHI  
State or Province of MIYAGI-KEN  
Residence::  
Country of Residence:: JAPAN  
Street of Mailing Address:: 05, AZA-AOBA, ARAMAKI, AOBA-KU

City of Mailing Address:: SENDAI-SHI  
State or Province of Mailing Address:: MIYAGI-KEN  
Country of Mailing Address:: JAPAN

Postal or Zip Code of Mailing Address::

**Correspondence Information**

Correspondence Customer 000466

Number::

**Representative Information**

Representative Customer	000466
Number::	

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

**Foreign Priority Information**

Country::	Application Number::	Filing Date::	Priority Claimed::
JAPAN	2000-396894	12/27/00	Yes

**Assignment Information**

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::

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